

Issue No. 1 • Vol. 3 • May 2009



☒ Opportunity

☒ Experience

☒ Ideas

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Beginning with the advice he got from his father, Albany writer and man about town Joseph Krausman developed an interest in enjoying the multitude of public offerings from libraries, colleges and universities, and other institutions in our community. Now Joseph always has something to do and his essay gives us an idea about all the things we have available in our community.

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## The Dynamics of Aging and Our Communities

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## Mission Statement

CCQ is an electronic and print public policy quarterly dedicated to looking at the aging segment of our society and region as it redefines itself and intersects with a wide cross section of demographic, social, cultural and economic features of society. In this light, we will consider subjects such as city and town planning, environmental advocacy, economic development, housing, work force, education, mobility, regionalism, governance, marketing, recreation, health care, social services, creativity, demographics, emerging technologies and the roles of nonprofit organizations. Our audience is public and private decision makers and all others seeking to understand a changing society. We will offer concise, thoughtful and interesting articles. Comments, including letters to the editor and recommendations from our readers, are welcome.

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*Richard Iannello*

### **To Be (Here) . . . or Not to Be (Here)**

Once again, I have procrastinated and delayed writing this column. My first thought is to talk about aging in place or perhaps aging in community. It's timely, there's much to talk about, and while the phrase is sometimes misunderstood, the concept remains valid: people want to be where they are, not where their children tell them they ought to be. Many organizations in the Capital District and across the state are doing terrific things to help individuals age in place. Yes, this could be a very good topic for this column. But rather than talk about aging in place by making your home, neighborhood, or city more elder-friendly, I'm going to devote this column to reasons why we should promote Upstate New York as a good place to live as we age. As I contemplate how I might tackle this subject, there is one reality I can't ignore. Not everyone thinks remaining in Upstate New York is a good idea, and for a lot of reasons.

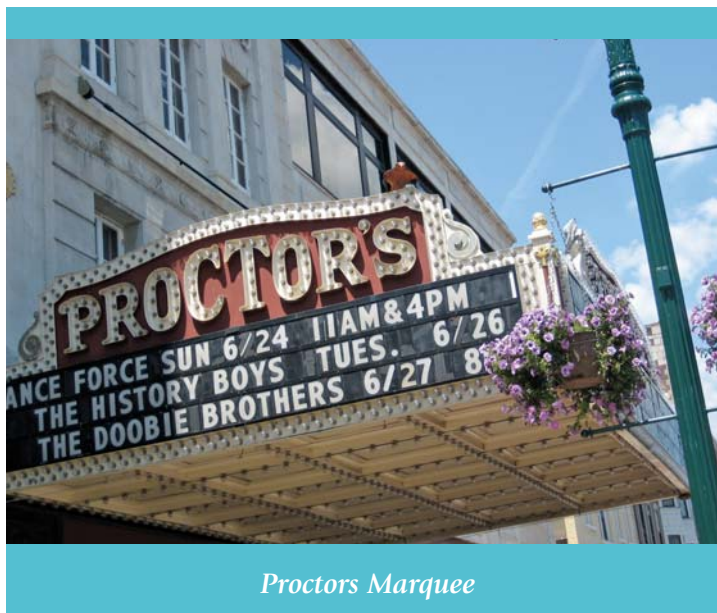
Let's begin by realizing that many of us who live in Upstate New York are here because this is where we started out. **Our families are here**, our friends, our schools, our churches, etc.; they're all here. As a result, leaving this area means leaving things very dear to us. Then there is the fact that many communities are **service-rich environments**. Our local county Offices for the Aging and a multitude of service providers offer us the help we depend upon as we age. What's another reason to remain in Upstate New York? **It's beautiful!** Whether we're talking about the rolling hills and mountains of the Southern Tier, the peaks of the North Country, or autumn in the Hudson Valley—it's all very good. And, each time cities in the Sunbelt put out warnings about water consumption, I'm grateful that I'm in an area that seldom faces water use restrictions (not that we should waste any of it).

But not everyone chooses to remain in Upstate New York. People have been voting with their feet for many years. While we typically think of Upstate New York as having an out-migration problem, a recent report by the Buffalo Federal Reserve pointed out that Upstate New York has more of an in-migration problem. The report points out that "the in-migration rate is the number of college-educated people moving into a state over the five year period as a percentage of the entire college-educated resident population." The report goes on to state that "If Upstate New York were a state, it would have the nation's lowest in-migration rate, 9.3 percent."

Nonetheless, plenty of Upstaters do not share my enthusiasm about the benefits of aging in Upstate New York and depart for the Sunbelt after retiring. Why is that? Perhaps it is because New York State is a very expensive state in which to live. Our **taxes** are amongst the highest in the nation. (Note: I'm amused by people who differentiate between highest, second highest and third highest—as if it matters.) The **economic outlook** of Upstate New York is probably more troublesome than officials would like us to believe. The economies

of many Upstate communities are closely aligned with the decline in manufacturing being experienced by similar communities in Michigan, Ohio, and other post-industrial regions. New York State can be **bureaucratic** and accomplishing things here can take a long time. We have many layers of government and while our state has done much to make things happen more quickly and more responsively, the truth is, many other states are less bureaucratic. And finally, what about the **weather** in Upstate New York? I can't tell you how many of my friends tell me that even if New York State had the lowest tax rate in the country, our Upstate weather would still force them to consider warmer climates. Personally, I don't totally buy this argument because for every cold, blustery winter day we experience, someone, somewhere else, is experiencing a wild fire, a drought, a hurricane, or a tornado. No, I'm not going to put weather on the negative list.

So let's summarize. We should stay in Upstate New York because: 1) our family and friends are here; 2) we have a service-rich environment; and 3) it's a beautiful place to live. Or, we should leave Upstate New York and age elsewhere because: 1) our taxes are very high; 2) Upstate economic conditions are troubling; 3) New York State is bureaucratic with many layers of government; and 4) the weather (no wait—I'm not going to go there).



*Proctors Marquee*

What do you think? How do the positives stack up against the negatives? Are there more positives? Are there more troubling negatives? Although we have considerable out-migration, many New Yorkers choose to remain here and while they might complain about taxes, they lead rich and fulfilling lives as they age in their communities.

I would be interested in hearing what you think about aging in Upstate New York. If we get sufficient responses, we will dedicate a future article in CCQ to let you know what others think about this topic. You can e-mail me at [director@albanyguardiansociety.org](mailto:director@albanyguardiansociety.org) or write to me at Albany Guardian Society, 12 Corporate Woods Blvd., Albany, NY 12211.

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*Paul M. Bray*

### **New Challenges for the Design Profession**

Since the end of World War II, a few basic assumptions have shaped the design of our homes and communities. Big is better so we have McMansions and SUVs. We will never run out of space so we've gobbled up greenfields and converted them into sprawling suburbs, shopping malls, and office parks. We will never grow old or have declining health or impaired physical conditions so we've ignored, for example, barriers in new homes and other buildings. Our automobiles can serve all our needs for mobility so we ignored transit and rail.

In recent years, reality has checked-in and toppled our basic assumptions creating new challenges and opportunities for the design profession. New planning philosophies have been born like New Urbanism, a back to the future revival of the lost art of place-making. It promotes creation and/or revitalization of compact, walkable, mixed-use cities and towns. Urban planners, architects, landscape architects, and interior designers are trying to get in the vanguard of designing livable cities and people-friendly buildings.

The mission of the American Institute of Architecture (AIA) Design for Aging Knowledge Community (DFA), for example, is to foster design innovation and disseminate knowledge necessary to enhance the built environment and quality of life for an aging society. This includes relevant research on characteristics, planning, and costs associated with innovative design for aging. In addition, DFA provides outcome data on the value of these design solutions and environments.

If you wish to become involved with Design for Aging Knowledge Community, call AIA Member Services, 800-242-3837, and designate Design for Aging as one of your knowledge communities.

In this issue we continue our look at the future and how to successfully build and make communities work.

In part, this involves facilities like Proctors in Schenectady succeeding by thinking and acting to be intergenerational and being engaged at every community level from improving its downtown location to reaching out to schools in the region's hinterland.



*Full House of Children*

Those who know about cohousing are usually intrigued by the thought of a neighborhood crafted by a group of people that will live in the neighborhood. The cohousing projects I've know were developed on greenfields. In this issue we learn how and why cohousing is an excellent approach for building housing and community within existing urban areas.

In thinking about community, we also need to think about how the buildings in the community are designed especially if we want intergenerational neighborhoods and communities. The growing attention to Universal Design couldn't arise at a better time. We don't just need a roof over our head; we need safer, easy to use homes for everyone. It just makes sense.


Finally, we need to dig deep in understanding what is needed at both the personal and the community levels to adapt to having the best conditions for people to age in place. Drawing from personal experience, Eric Weller does this for us in this issue.


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*"In this issue we learn how and why cohousing is an excellent approach for building housing and community within existing urban areas."*

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Our personal essay and guest columns address important questions: What is there to do in our personal lives? How is the health care system going to keep up with the growing needs of an aging population? The personal essay shows us how to answer someone who asks if there is anything to do in our communities. Joe Krausman lets us know there are actually more than enough interesting things going on daily in our community. We also learn from the New York State Health Commissioner that the state is very active in developing programs targeted to assure the continued delivery of high-quality health care in the years to come.

When the Hudson Tricentennial was celebrated in 1909, public attention was directed to history, the great wave of immigration taking place at the time and the future that was dawning with aviation, the automobile, electricity, and the dawn of awareness about the need to protect our natural landscape. As we celebrate the Hudson Quadricentennial this year, we have another opportunity to look back, consider what is happening now, and be more aware about how we can shape the future. 

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## Feature Organization

### **Proctors: Reaching to All Ages**

*By Philip Morris*

When I arrived at Proctors in March of 2002, the many people who had adopted the theater as their own stopped to advise me. Some of the advice was personal: watch out for this person; please be sure to have lunch with that donor. Some of the advice was strategic: program more; program less; add more of this or that kind of entertainment.

An oft spoken observation was that Proctors' program was aimed only for attendance by "blue hairs."

In my first couple of years, I attended everything. While our audience certainly did skew older, it was also obvious that so did our volunteers and staff. And I had to ask myself the obvious question, "Is this such a bad thing?"

The largest cohort group in American history (one that includes me and is usually referred to as boomers) was about to enter the "blue hair" era (though probably sans tint). This huge group of folks was more likely to live longer than any other generational group in history and to be more interested in the arts than any previous generation. Metaphorically, "blue" was looking pretty good.

As I spoke to our many friends, attendees, and volunteers, though, I figured something else out about the people who supported and attended Proctors: they had been doing it for nearly twenty-five years. They were quite a bit younger when they began this relationship and had no intention of stopping it. In essence, these folks represented the forty year-olds who had saved Proctors from demolition in the mid-1970s. They grew up with Proctors as core to their community efforts and ambitions. Most importantly, they wanted to share Proctors with their neighbors, their kids, and their grandkids!!!

Far from seeing Proctors as a club for the aged, the thousands of folks who kept Proctors on their dance cards and volunteer schedules wanted others of all ages to catch the spirit and join the party. It was clear we were not

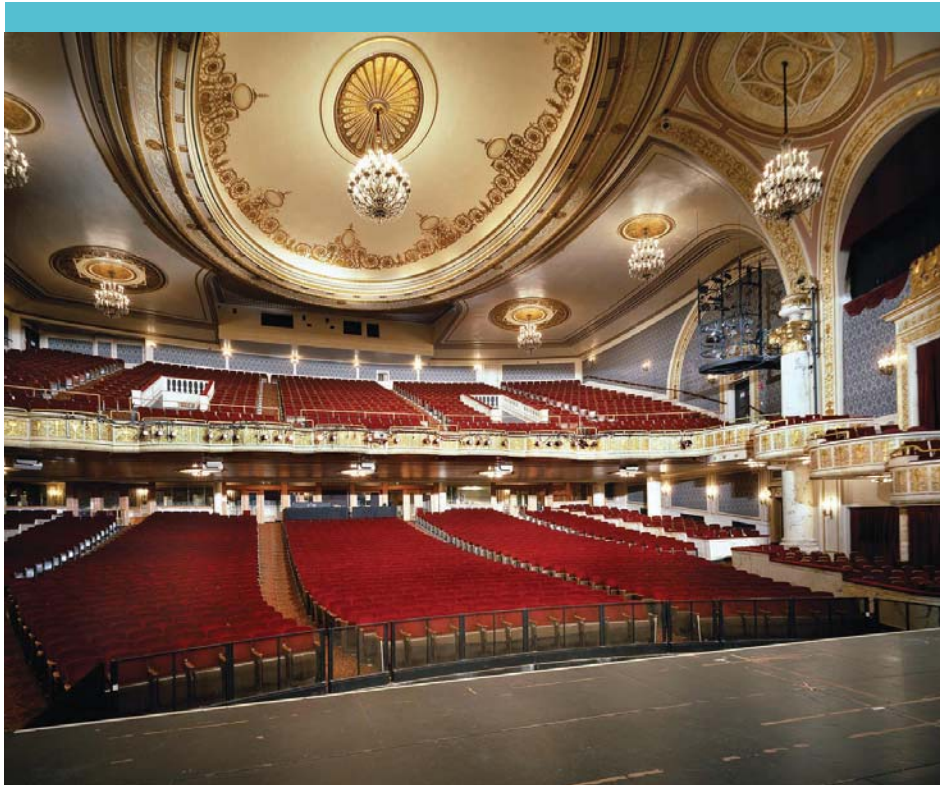


*New Box Office*

aiming for “blue hairs” as much as we had not reached out well enough to their kids and families.

So, for the last six or seven years, we have pushed ourselves to broaden our view, our sense of responsibility, and our value to the community. We have done so through what we do, how we do it, and what facilities we have built.

Through our expansion program, a \$40 million undertaking, we have built two new theaters, one a highly flexible 400 seat theater with the region’s only full wide screen film capacity. Using the competitor to Imax, iWERKS giant screen projection, children from the region can see movies like *Antarctica*, *Bugs*, *Forces of Nature*, *The Human Body*, and *Fly Me to the Moon* (some in 3D!). With our new education center, school groups can have lunch, see a film, and participate in workshops on “Survival,” “The Life Cycle of Insects,” or “Healthy Habits.”



*View from Main Stage*

We have partnered with the regional BOCES to establish a half day theater technology class that offers sophomores and juniors in the area’s high schools a chance to work side-by-side with professional designers, lighting specialists and sound engineers while learning the skills of theater craft from a full time theater educator. We have sought and delivered nearly

\$100,000 of funding to schools to build residency programs utilizing artists who work with motivated teachers to build hands-on academic programs using the arts as a tactile teacher.

But, most significantly, we have made education core to our mission. Like the hundreds of volunteers who used their time to model their commitment to community, we are trying to model ourselves as active and engaged in making our community a great place to live and work and learn.

Our expansion, though, needed to connect to more than young people and learners. Downtown Schenectady ten years ago was at a low point, with vacancies everywhere and people obviously absent. Just as our expansion had to mirror the intentions of our volunteers, it had to mirror and respond to the realities of our neighborhood.

To that end, we chose to stretch ourselves by creating a district energy component to our program. With the help of NYSERDA (New York State Energy Research and Development Authority) and the Schenectady Metroplex Development Authority, we invested nearly \$8 million in a plant to create and distribute hot and cold water that our neighbors could use to heat and cool their buildings. Currently, with customers like the new Hampton Inn, the new Center City building housing an expanded MVP and a new downtown YMCA, and neighbors participating in our under the sidewalk snowmelt system (have you seen our sidewalks steam in winter????), Proctors' energy efforts have saved hundreds of thousands of dollars in capital investment for our customers, given them redundant shared power sources, and reduced the downtown's carbon footprint by almost 300 pounds an hour.



This energy plant was built with the long term vision of binding the new downtown together by stabilizing utility costs for buildings that can see wild fluctuations otherwise and, therefore, to help Proctors to have a stable, viable and active neighborhood. With our substantial facility investment, we did not want to find ourselves again in a neighborhood in decline. Proctors' energy plant will be part of making sure that does not happen.

Finally, we challenge ourselves everyday about the question of what is art and culture? Yes, certainly, it is the obvious: plays, musicals, music events, dance events, and the range of traditional activities one would expect of a performing arts center. It seems to us, though, that election night coverage is part of our culture. So is the Super Bowl. So are storytelling, poetry slams, chess simul-plays, visual arts, local artists and craftspeople, business conferences, farmer's markets, graduations, weddings, memorial services, and presentations on global climate change as seen from Antarctica.

And, yes, you can participate in all of those, plus dozens more, at Proctors. In essence, we wanted to become the community's "salon," its living room, its place to convene, learn, debate, and celebrate creativity and place making.

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*"Finally, we challenge ourselves everyday about the question of what is art and culture?"*

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Our older volunteers are still here—by the multiple hundreds. They smile, volunteer more nights than they ever did before, and with all of us, relish the changes we have wrought together.

Now, their children and grandchildren are here, too, and so are their neighbors. If you are interested in volunteering for Proctors, contact Cindy LaRoe at 518-382-3884. 🦋



*GE Giant Screen*

🦋 *Philip Morris is the CEO of Proctors and has been responsible for leading some of the changes at the new Proctors. Check out [www.proctors.org](http://www.proctors.org) for additional information.*

## **Cohousing as the Seed to Good Redevelopment**

*By Charles Durrett, Jean Nilsson, and Jennifer Barrett*

Cities and towns across America suffer from too few new houses being built in or around the core of town and far too many being built three traffic jams away from downtown. If President Obama's stimulus program facilitates new housing construction, let's make sure that it doesn't facilitate the all-too-deleterious sprawl. Used inappropriately, the stimulus package will add to long-term problems of cities and towns. At its best, it will realize the opportunity to address key planning and development issues at the same time, including:

- Land use and development
- Public transportation
- Infrastructure

Actually, land use, transportation, infrastructure, and development are one and the same. To get public transportation to work, we need to infill our cities and cease sprawl. Sprawl devalues our landscape and environment like no other activity we engage in. It's worse than mining; it's worse than factories; it's even worse than logging.

What we need are cities and towns with appropriately scaled houses (perhaps nothing over four stories); retail, services, and employment opportunities; natural open space (allowing for drainage and run-off); appropriately located parks for children and older folks; places for neighbors to meet, play volleyball, play chess; and neighborhood design that allows citizens to be readily a party to something more than their own house.

We need to grow from our existing infrastructure and to build where roads already are, where water and sewers already are, and where we enhance the probability for future public transportation. We need to build where we are not consuming farm land, driving long distances, deforesting, and paving literally acres of land per house to access and to service those houses.

### **Building in existing cities and towns**

But building new houses in existing cities and towns is much harder than building outside of town. The two major hurdles of building in cities and town are:

- Neighbors
- Security

As an architect, project manager, and co-developer, I have found only one consistent means to overcome these two hurdles—and that is by designing and building cohousing communities. Cohousing communities are redevelopment schemes that are designed to evolve into socially and environmentally sustainable communities.

Developers usually like building in the sticks because there is no one there to object. As soon as you build where there are neighbors, they will find reasons to object to what you are doing, usually couched in potential traffic and parking problems. But generally, it's the fear of change itself that is the problem. When the new development is out of town and citizens don't see it (despite the real effects of more driving, more traffic, and more pollution), they don't object to it.

**What is Cohousing?**

Cohousing communities, despite their peculiar or perhaps "unfamiliar" name, are nothing new. They are simply families and singles, elderly and young people, a cross section of the population who are in fact quite conservative about what they think a neighborhood is. They believe that a neighborhood is a place where you can easily walk to your neighbor's house, you know all of your neighbors, and while you have your own house of course, you also have a neighborhood place that kids can walk to and play with others and where you can share a meal with your neighbors on occasion. And you might have other common facilities that make your life easier, more practical (a shared workshop, for instance), and more fun (you have a place where you can have a neighborhood dance), as the future neighbors decide for themselves.

We have been involved in over 50 cohousing developments in North America now. Only two of them have been stopped by neighbors, although on average neighbors stop almost half of proposed infill projects. The difference is that, at the public podium, future cohousing residents themselves make the best case for why they should be able to build. They talk of being able to walk to school, walk to work, or take the bus. They talk about car-sharing and carpooling, and not driving as much. Residents from nearby cohousing speak. One resident with four children talks about how he used to plan two to four play dates a weekend, and in the last two years of living in cohousing, hasn't planned one. The neighbors and city officials get to know these people as real people, not just their driving habits and the color of their car. It's easy to say no to a developer, and it's very difficult to say no to a young mother discretely nursing an infant to keep him from fussing as she takes her turn at the podium.

**Building cohousing**

We had one of our recent projects fully approved in nine months, while the three developments previously proposed on that infill site were soundly declined by neighbors and officials, even though one was a subdivision of single-family houses with more or less the same size houses as the neighbors who opposed it. In the project before that, the new downtown cohousing community was approved in eight months. Meanwhile the three new projects that surrounded it took five to seven years to get approved, were morphed several times, and once everyone was exhausted by the protracted public battle, they let very unattractive projects get built. Several cohousing communities have won design awards.


## Security

Most people are leery of marginally safe inner-city neighborhoods, and that makes sense. But I have seen over and over again that people who build a custom neighborhood, and move into it at the same time as 30 or 50 other people, feel nowhere near as threatened as they do if they were to move into the same neighborhood on their own. We moved from an old bucolic Berkeley neighborhood to the rough and tumble, formerly industrial center of Emeryville, where at the time few residences existed and those that did had barred windows or were more safely located on the second floor (with the downstairs devoted to storing autos). One residence on the street identified itself through graffiti as “Fort Apache” to let would-be intruders know: “Bother us at your own risk.”

Katie and I and our one-year old daughter moved to Emeryville in 1991 when this under-developed donut hole of the Oakland-Berkeley area had only 2,100 people. We never would have moved there without the comfort and community of the rest of the cohousing community. Today, there are almost 10,000 people living in Emeryville. Nora Davis, the mayor then, and still the mayor seventeen years later, credits the cohousing community as having a significant role in the turnaround of Emeryville. Jerry Carnillia, a neighbor on the street, states that before the cohousing community was built, and given the hidden nature of the street, someone dumped a pickup load of garbage on the street just about every week. Since the cohousers moved in, it’s only happened once.

## Benefits of cohousing

Cohousing projects are approved more easily because, not only do the future residents win over the officials, they also win over their future neighbors in the larger community. Often, and before it’s all said and done, residents come to testify on the project’s behalf. Not only does the public know them as Ms. Carsten, who is the librarian at the local high school, and Mr. Moore, a local firefighter, but they also can see that they are planning a great project. They bring security to a neighborhood that was tenuous, uneven, and that really could use a positive shot in the arm. For the people moving into cohousing, the move brings them closer to jobs and culture and it means a lot less driving.


Cohousing achieves several goals that will be important to growing and maintaining a sustainable living environment: cohousing projects are often stitched into an existing community through infill development or rehabilitation of existing buildings, thereby limiting additional sprawl and greenfield development; cohousing brings socially and economically diverse residents to a downtown where they can benefit from proximity to services, employment opportunities, recreational facilities, and public transportation, and where they become an active part of a neighborhood’s street life; and, finally, cohousing provides opportunities for collaboration and a localized lifestyle that binds a community through social, economic, safety, and environmental benefits. 

The Doyle Street cohousing project, from beginning to end, is in Emeryville, CA, in the San Francisco Bay area (a city in the East Bay corridor, adjacent to Berkeley and Oakland). The project included 12 units and was completed in 1992.



**Publications:** Kathryn McCamant and Charles Durrett. *Cohousing. A Contemporary Approach to Housing Ourselves*. Berkeley, CA: Ten Speed Press, 1994 (2nd edition).

Charles, Durrett. *Senior Cohousing. A Community Approach to Independent Living*. Berkeley, CA: Habitat Press, 2005.

 Chuck Durrett is an architect with McCamant & Durrett Architects. He has authored *Senior Cohousing: A Community Approach to Independent Living* and coauthored with Kathryn McCamant *Cohousing: A Contemporary Approach to Housing Ourselves*. His e-mail address is: [charles.durrett@cohousingco.com](mailto:charles.durrett@cohousingco.com) and his Website is: [www.mccamant-durrett.com](http://www.mccamant-durrett.com). Jean Nilsson is an architect and Jennifer Barrett is an architect intern.

## Universal Design Makes Aging in Place More Possible

By Emanuel Andrade

“Two inches at the entry door can be the difference between Grandma living at home or leaving to live in a nursing home,” said a participant in response to a lecture I presented about a year ago. That statement helped me to illustrate to the room full of people how Universal Design could help them maximize the quality of life and aging in place in their community.

The purpose of Universal Design is to simplify life for everyone by designing products, communications, and built environments that are usable by as many people as possible—regardless of age, ability, or situation—without special or separate design. Most simply, Universal Design is the human-centered design of everything, with everyone in mind.

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*“Universal Design is not intended to create handicapped accessible homes, but rather user-friendly homes that offer accessibility and appeal for everyone”*

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Stimulated by the presence of aging baby boomers, more and more counties and cities across the country are promoting Universal Design concepts in home building and educating their residents about the benefits. The state of California adopted a voluntary code that cities can use. The city of Irvine, California, developed a voluntary code and an education program. Howard County, Maryland, created a zoning category to encourage the construction of “Universal Design” homes.

The vast majority of people over the age of fifty want to “age in place”; that is, to remain in one’s current home as one grows older rather than relocate to new quarters, a senior community, or a care facility. According to a recent AARP housing survey, 83 percent of older Americans indicated that they would prefer to remain in the familiar environment of their current homes throughout their maturing years, which means living in their home safely, independently, and comfortably, regardless of age or ability level.

### How to?

A “Universal Design” home can cost little or nothing when compared to a house that does not incorporate Universal Design principles. Those features do not cost very much more if done in the early stages of design. Home remodeling and modifications can be much more expensive and difficult to do when regarded as afterthoughts.

Universal Design is not intended to create handicapped accessible homes, but rather user-friendly homes that offer accessibility and appeal for everyone. It helps people to prepare

their home environments in advance of accidents or injuries, one of the primary problems against aging in place.

### **Recommendations**

Universal Design features include:

#### General

- Adapt lower floor for possible one level living
- Easy garage or parking access
- One-step or zero-step entry
- Wider doorways and hallways
- Easy to open door handles instead of knobs
- Increased ambient lighting levels
- Rocker light switches at 42" instead of 48"
- Luminous switches in bedroom, baths and hallways
- Slip-resistant flooring
- Short-pile carpets
- Peep hole at low height
- Color contrasts as an aid to visual acuity

#### Bathroom

- Lever faucets and anti-scald valves
- Temperature controlled shower and tub
- Stall with low stepping threshold and seat
- Higher toilet seats
- Grab bars
- Higher bathroom counters
- Installation of medical response device

#### Kitchen

- Pull-out shelves and lazy susans
- Easy to grasp cabinet pulls
- Task lighting
- Cook-top with front controls
- Side-by side refrigerator
- Variety in counter heights
- Gas sensor near cooking


#### Living Room

- Seating at least 18" off the floor
- Chairs with sturdy arms

The National Association of Home Builders (NAHB), in partnership with AARP and the NAHB Research Center, has created a Certified Aging-in-Place Specialist (CAPS) program to teach remodeling professionals how to modify homes specifically geared towards aging in place.


**Conclusion**

Universal Design is not just about installing ramps and grab bars. A home can be safer and easier to use for persons who are aging or frail, or who have certain temporary or permanent activity limitations or disabilities. Wider doors and hallways can accommodate baby strollers as easily as wheelchairs; a teenager on crutches can appreciate a “zero-step” entryway as much as a senior using a walker.

Homes can evolve to meet a family’s changing needs over a lifetime. No one should be forced to move because of a crisis of unexpected health changes. As in the example cited in the first paragraph, Grandma should have the opportunity and ability to remain in the home of her choice indefinitely. 



Wright Family Atrium

 Emanuel Andrade is an architectural designer with Adaptive Environments. Emmanuel coordinated Adaptive Environments’ contract for the Harvard Checklist project in 2007 for the University Disability Coordinator. Recent projects include: Design Coordinator for renovating the historic 951 Boylston Street building to become the new studio building for the Boston Architectural College, and Co-Director of the Title II Accessibility Audit for Bunker Hill Community College. Emmanuel is an AIA Associate and a LEED accredited professional.

## A Cheap Insurance Policy for Aging in Place

By Eric Weller

Within the last two decades we have witnessed a sea-change in many parts of this country, indeed, in many of the most economically advanced countries in the world, in terms of attitudes toward aging and the aged. No longer do we think in terms of moving our grandparents and parents out of their homes into “safe” environments, closeted there with other parents and grandparents—strangers to each other—uprooted from their local communities and friends.

Instead we have finally come to realize what the “less developed world” has always known, that helping our elders to stay put within their communities, where extended “families” of both kith and kin provide a much richer social and cultural support matrix, is a far healthier and, in almost every respect, a far superior alternative. Not that nursing homes are doomed to extinction overnight. For many, there will always be a need for higher levels of care than the local community can realistically provide, but the nursing home as the immediate default mode at the first sign of failing health, eyesight, judgment, etc., is fast becoming a thing of the past. There are many reasons for this sea-change in attitude, from fairly simple economic considerations at one end of the spectrum to the complexities of collective social/psychological guilt at the other. The most important thing is that it has indeed occurred.

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*“Put another way, ageism is alive and well, indeed it flourishes, among the aged!”*

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Not everyone in every community is on board with this “new” way of thinking about the aging process—far from it. We are seeing, however, a movement that has developed critical mass, and the myriad programs springing up around variants of the basic idea of aging in place, like the Saratoga Vital Aging Network, are testimony to the timeliness and broadened appeal of the movement.

If anything, the current economic climate should accelerate the adoption of programs designed to assist seniors to stay in their homes, as more and more studies reveal not only that it is cheaper than the alternatives, but the dividends both to the community and the individual are far greater. For the community, it means the retention of a great source of experience (sometimes, even wisdom!) as senior citizens interact with their younger counterparts; for the individuals, it holds the promise of a continued life of meaningful engagement in the affairs of the community they have come to identify with and which gives their past a meaning and their future hope.

Oddly, it appears from much accumulated anecdotal evidence, that the least cooperative members of our society in moving toward the goal of self-caring and self-sustaining

communities are the seniors themselves. It isn't that our parents and grandparents don't want to stay in their homes, connected with their friends and neighbors—in many cases their own families as well—they just don't see themselves as elderly.

Put another way, ageism is alive and well, indeed it flourishes, among the aged! Almost everyone I know has a tale similar to the one I am about to share. My dear, now departed, mother used to visit my wife and me in Saratoga Springs every summer to take in the New York City Ballet and the Philadelphia Orchestra at the Saratoga Performing Arts Center. Typically, she would stay with us for about a month to six weeks before returning to my sister's home where she had lived since selling her own home after I, her youngest child, went off to graduate school. The last time she came to visit she suffered a mild stroke, fell as a result, and broke her leg. At this point she was eighty-



*The GE Theater*

seven years old. We still had two teen-agers at home (our eldest daughters were off at college and my wife and I both worked full-time) and it quickly became apparent that the level of care mother would require for some time to come was beyond our capacity to provide, so after consulting with my siblings I began to research alternatives.

In the meantime, my sister had developed her own health issues to deal with and returning mom to her was no longer an option. By a stroke of luck the Wesley Health Care Center was expanding, and about ten months later mother was able to move into the new facility. Mom was always something of a pioneer and wasn't at all fazed by this move, but when I first asked her (after a week at her new "home") how she liked it, her response was enthusiastic about the facility, the staff, and the new friends she had quickly made, but she regretted the fact that there were so many really old people there!

This attitude among the elderly is not at all rare, indeed it is almost commonplace. One of the first aging in place experiments, Beacon Hill Village in Boston, learned early on that the choice of a name and motto were critical. Any name or motto that suggested "OLD!"

was to be avoided like the plague if you wished your program to get off the ground with its target population. The human capacity for denial is, seemingly, boundless.

The disconnect between the intellectual acknowledgment that one is, say, eighty-seven (like my mother), and the emotional acceptance of one's pending or actual infirmity, is a chasm wider than the Grand Canyon. Just as the inveterate smoker can read the statistics on smoking and lung disease, heart disease, and cancer and be intellectually convinced that smoking is indeed a very bad idea without hesitating to light up, so the elderly can listen to the recitation of statistics on accidents in the home, causes and consequences, and give intellectual assent yet still refuse to part with their favorite throw rugs and step-stools! Of course when the smoker comes down with lung cancer or the senior trips on his/her favorite rug and breaks a hip, the stupidity of their behavior is quickly evident to them, but unfortunately too late. How then to mount an offense against this diabolical flaw in our all-too-human nature?

### **Plan ahead**

As with so many problems in life, I believe the answer lies in "getting to them early." We are all familiar with the idea of health and life insurance and we consider it prudent to provide for our own care and eventual demise, with provision for our survivors.

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*"The disconnect between the intellectual acknowledgment that one is, say, eighty-seven (like my mother), and the emotional acceptance of one's pending or actual infirmity, is a chasm wider than the Grand Canyon."*

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I think that if we put more effort into marketing membership in aging in place programs as cheap and prudent insurance against the day when we really need help staying in our own homes, a number of consequences would follow: (1) A significant number of quite healthy and lively seniors who are not in immediate need of such services would see the virtue of "buying in"—denial becomes much less an issue when there's really nothing to deny; (2) Just as with insurance, spreading the risk over a large pool of insured makes it possible to provide services at a much lower cost to those who really need them when that time comes; (3) It becomes possible to adopt sliding scales of membership fees, depending on income, so that those who ordinarily would be hard-pressed to afford the normal rates can now do so. What counts as "normal" depends, of course, upon the particular aging in place program.

Cambridge at Home and Beacon Hill Village—both of which cater to largely professional retirees with substantial incomes and offer quite an attractive array of services—have annual membership fees of \$1,000 and up, and fund a limited number of lower income memberships through aggressive annual fund raising. But not every program need or can

operate at that level. Umbrella of the Capital District, for example, offers essential services on a sliding scale, depending on income, for a “normal” annual fee of \$325 and for as little as \$145 for those whose income level qualifies them for the lowest rate (with several levels in between, determined by type of housing and by Federal income guidelines for public housing assistance). I see no reason why service “upgrades” couldn’t be made available for those who can afford them, including cultural and educational enrichment opportunities as well as enhanced basic services, but this is icing on the cake and need not detain us here.

Few hesitate to use health care services they have paid for in advance through insurance pools, whether privately or publicly administered. In a similar manner, aging in place insurance would trump the denial factor when the need for services became real to those insured. What is needed is a strategy to lure seniors into the support network before denial sets in. I believe that re-conceptualizing our efforts to bring needed services to the elderly and infirm at an earlier stage in their lives as a prudent and affordable insurance policy, is just such a strategy and could be key to breaking down their resistance. There are many other benefits to be gained from re-imagining the benefits of aging in place programs, but enough for now—perhaps more later. 🐾



*Robb Alley and Muddy Cup*

🐾 *Eric Weller is a retired Skidmore philosophy professor and college administrator (Dean of the Faculty at Skidmore for fifteen years). He served in local government as a member of the Saratoga Springs Civil Service Commission for twenty-five years and Chair of that body for four years. He is currently in his second term as a Commissioner on the Board of the Saratoga Springs Public Housing Authority and is a Founding Member of the Board of Directors of the Saratoga Vital Aging Network.*

## Personal Essay

### **But I Have Nothing to Do!**

*By Joseph Krausman*

When I was a teenager, I would occasionally say to my father, "I have nothing to do." His answer always was, "You have nothing to do, then read a book." It was good advice. I have been an avid reader and library buff ever since.

In addition, the seed was planted that led me to read my community like a book.

Beginning with local libraries, I discovered they not only have books, but they also have DVDs, audio books, lectures, concerts, book reviews, and films. The Albany Public Library has a book review every Tuesday (free refreshments to boot). I saw an Indian film series at the Guilderland Public Library; I took a class about literature on "Fathers and Daughters" at the Colonie Town Library; I went to a concert at the Bethlehem Library; and so on and so forth.

The Capital District is so rich in events that the problem is not that there is nothing to do, but which one of these three events, for example, should I go to. Tonight should I go to the Pine Bush Dinner, or go to the lecture at the New York State Museum, or meet a friend at the Spectrum Theater?

A special treasure of the Capital District is the New York State Writers Institute. Thank you, William Kennedy, for your wonderful gift to create this Institute.

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*"The Capital District is so rich in events that the problem is not that there is nothing to do, but which one of these three events, for example, should I go to."*

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Every semester a booklet is published with the Institute's events for the coming semester. There is an event or two almost every week. Every Friday there is a free film at Page Hall on UAlbany's downtown campus. I was shocked when I spoke to some people who didn't even know the Institute existed. The names of the writers who have spoken at the Institute are breathtaking: Toni Morrison, Norman Mailer, Philip Roth, Joyce Carol Oates, Kurt Vonnegut, as well our own renowned William Kennedy. In fact, if you can think of a major writer, he or she has been here, or will be here. If you go to a Writers Institute event on the UAlbany uptown campus, even the parking fee is waived. All events are free. Such a deal!

You can be on the Writers Institute mailing list by calling (518) 442-5621, or check the Website at [www.albany.edu/writers-inst](http://www.albany.edu/writers-inst).

All the local colleges have events that are free and open to the public. Two weeks ago I saw the film *Milk* at Union College and last week they showed *Frost/Nixon*. The movies were being shown at the same time at local theaters for a fee. I look forward to the annual “Falconer Natural History Spring Lecture Series” at UAlbany. There’s a wonderful music series at the College of St. Rose. The new concert hall is magnificent and many of the concerts are free, or at a reasonable cost. Hmmmm...., on April 17 should I go to “An evening of Opera” at St. Rose or to the Czech film at Page Hall?


Seniors may avail themselves of free classes at local high schools during the school year. In the Town of Colonie, I have taken classes in drawing, Chinese, Tai Chi, and dance, with a senior waiver of fees.

It takes a bit of effort to keep up with all the goings-on. Every week I check my calendars, “Preview” in the *Times-Union* and *Metroland*, bulletin boards, notices on walls, notices in libraries. On my refrigerator I have a calendar where I fill in the dates of events.

Do you know about the February *African Film Series* at Albany College of Pharmacy, or the public lectures at Albany Law School? Seek and you will find!

In addition, we can all broaden ourselves by doing something in our community for someone else. Volunteers are always needed for helping people learn English, or helping in a food pantry, or delivering meals-on-wheels, or helping kids with their schoolwork. I help Chinese and Korean students get to know our community. When you are doing something for someone else, you are doing something for yourself.

So, if you have nothing to do, you can always, as my father said, “Read a book.” And if your eyes are too tired to read a book, you can take an audio book out of the library and the book will read itself to you. And then there are unlimited interesting things for our enlightenment in the community. 🐉

 *Joseph Krausman is a writer, poet, theater director, and former policy analyst with the NYS Assembly. He is a man about town in the Capital Region who has learned how to find and enjoy what the community has to offer.*

### Meeting the Growing Demands for High Quality Primary Health Care

By Commissioner Richard F. Daines, M.D.

With each year that passes, the time to prepare for the health care needs of the Baby Boomer generation and the aged dwindles. The state's over-65 population is projected to grow by 50 percent by 2030, so demands for health care services are expected to significantly increase. The needs of the current aged and disabled communities are also a growing challenge. Our current health care system does not adequately reward the delivery of high-quality primary health care. This makes it increasingly difficult for hospitals and other health care facilities to attract and retain physicians, nurses and other providers.

Despite overall growth in the supply of physicians in New York between 2002 and 2006, many upstate regions saw no change in the number of physicians, and some regions saw a decline. Research indicates a substantial shortage of nursing professionals with labor projections indicating a growth in demand for 28,450 registered nurses (RNs) through 2014. In recent years, every sector of New York's health care system has been challenged to recruit and retain staff, especially in rural and certain urban areas where the shortage of physicians is particularly acute.



*Guitarist at Conference Dinner*

To help address physician shortages in certain areas of the state, last year, a state-funded initiative called *Doctors Across New York*, was enacted to help reform Graduate Medical Education and place physicians in underserved communities in a variety of settings and specialties to care for New York's diverse population. This initiative has several components including the Physician Loan Repayment program and the Physician Practice Support program.

The Physician Loan Repayment program provides new physicians in hospitals, health care facilities and in private practices with up to \$150,000 in order to repay their educational debt tied to a five-year commitment to practice in medically underserved rural or urban communities. Within this program, 25 annual awards will also be made to teaching

hospitals that develop curricula to train residents in primary care or specialty tracks to serve underserved areas. A resident identified by the teaching hospital would automatically qualify for loan repayment after completing training and securing employment in an underserved area.

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*“Our current health care system does not adequately reward the delivery of high-quality primary health care.”*

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Under the Physician Practice Support program, new physicians practicing in these shortage areas are provided with up to \$100,000 in start-up funds over a two-year period. Physicians in any specialty may apply for these two programs, as long as they can demonstrate that the specialty is in need in the underserved community. By the time you read this column, we expect to have granted up to 83 loan repayment awards and 126 practice support awards under the *Doctors Across New York* program.

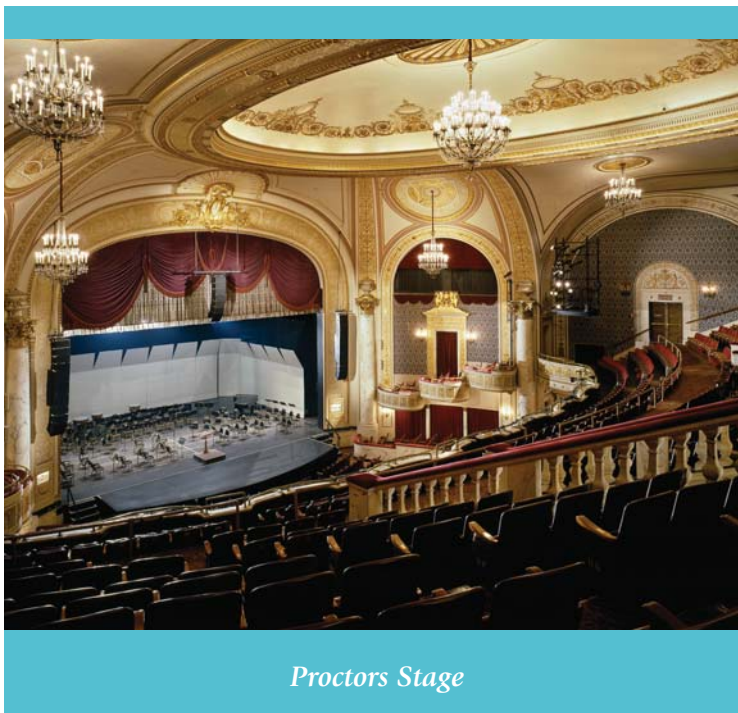
This year, Governor Paterson has put forth a strong agenda to help address the concerns of New Yorkers everywhere that need better access to better health care. Despite facing a deficit of more than \$14 billion, the Governor’s budget for the next fiscal year continues to build on steps begun last fiscal year. Under provisions in the current budget, physician offices that serve Medicaid patients in health professional shortage areas receive a 10 percent enhancement to their reimbursement, and Medicaid will pay an add-on for weekend and after-hour appointments. Under the proposed new budget, the Governor builds on these steps by increasing Medicaid payments to physicians by 80 percent over 2007 levels.



The Governor has also included more than \$21 million in Medicaid funding to support enhanced reimbursement to primary care clinicians who adhere to the standards for a “medical home.” This model encourages stability and

consistency of health care in medical practices in which patients have one primary health care provider who works with them in partnership to assure that all of their medical needs are met.

At the same time, the Governor’s proposed budget continues the process begun last year to rebalance New York’s off-kilter health system by moving more Medicaid dollars into primary and preventive care. Specifically, his budget would invest \$300 million in enhanced Medicaid reimbursement for hospital outpatient clinics, community health centers, behavioral health providers, and physicians’ fees.



*Proctors Stage*

With New York’s aging population, the Governor recognizes that there is a growing need for quality long term care. But the complexity of care and lower pay scales make the recruitment of nurses into the field of long term care a challenging one. As a result, less than one percent of RNs are certified in geriatrics.


This year, the Governor’s budget proposes to answer the challenge with a Long Term Care Nursing Initiative designed to recruit additional nursing students, RNs and nurse practitioners into long term care practice settings. This three-year educational incentive demonstration program creates a scholarship component and a loan repayment component, each paying up to \$8,000 annually for educational costs in return for a one-year commitment to full-time clinical practice in a long term care setting. The scholarship program will recruit students directly in nursing schools, and the loan repayment option will be available to newly hired nurses who choose to work in long term care settings.

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*“With New York’s aging population, the Governor recognizes that there is a growing need for quality long term care.”*

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We don't expect the shortage of health care professionals in underserved areas to be solved overnight, but the key is to encourage and incentivize young people to go into health care professions, such as primary care and long-term care, and to help them get into medical and nursing schools. The health care programs already in place and the proposed initiatives in the Governor's upcoming budget do just that.

Our challenge is and will continue to be to address the health care needs of **all** generations of New Yorkers in underserved areas of the state. These health care programs put us one step closer to transforming our health care system into the high-performing system New Yorkers deserve. 

Editor's note: The references in the Guest Column to the Governor's budget were made before the 2009-10 State Budget was adopted.

 *Richard F. Daines, M.D., was confirmed as the 14th Commissioner of Health for New York State in March 2007. Dr. Daines heads one of the nation's leading public health agencies with a budget of approximately \$49 billion. Under his leadership, the Department of Health administers the state's public health insurance programs, regulates hospitals and other health care facilities, conducts research in a premier biomedical laboratory, and supports public health prevention initiatives. During the past year he helped shape significant health care reforms that were adopted in the state budget, including increased access to health insurance coverage for the uninsured, greater emphasis on primary and preventive care, quality improvement initiatives, and investment in health information technology. Dr. Daines led the implementation of health care facility restructuring measures mandated by the State Legislature in connection with the Commission on Health Care Facilities in the 21st Century. He is currently leading an effort to reform health care through more effective local health care planning. Prior to becoming Commissioner, Dr. Daines was the President and CEO of St.Luke's-Roosevelt Hospital Center.*



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Images. This issue of CCQ uses images of features that make the Capital Region a special place. The cover has an image of the Half Moon on the occasion of the 400th anniversary of Henry Hudson's exploration of the river named after him, ceiling and seating at Proctors in Schenectady, and the 18th century Johnson Map.

Credits. The photo of the Half Moon is from James Cleveland and the New Netherlands Museum. The cover photo of Proctors is by Randall Perry. The photos of the marquee at Proctors on p. 2, full house of children on p. 3, a Gala on p. 7, the GE Theater on p. 17, guitarist at conference dinner on p. 22, and iWERKS 3D audience on p. 23 are by Richard Lovrich. The photos of the new box office on p. 5, view from main stage on p. 6, GE giant screen on p. 8, Wright Family Atrium on p. 15, Robb Alley and Muddy Cup on p. 19 and Proctors stage on p. 24 are by Randall Perry. The photos of the Doyle Street cohousing project were provided by McCamant & Durrett Architects.

This and past issues of CCQ are available in pdf format on [Http://www.albanyguardiansociety.org](http://www.albanyguardiansociety.org).

## Organizations and their web sites that may be of interest to CCQ readers

**Albany County Department for Aging**

<http://www.albanycounty.com/departments/aging>

**Albany Roundtable**

<http://www.albanyroundtable.com>

**American Library Council**

<http://www.lff.org/about>

**Capital District Regional Planning Commission**

<http://www.cdrpc.org>

**Center for Economic Growth**

<http://www.ceg.org>

**Civic Ventures**

<http://www.civicventures.org>

**Community Foundation for the Greater Capital Region**

<http://www.cfgr.org>

**Federal Reserve Bank of New York, Buffalo Branch**

[http://www.newyorkfed.org/aboutthefed/buffalo\\_branch.html](http://www.newyorkfed.org/aboutthefed/buffalo_branch.html)

**Fulton County Office for the Aging**

<http://www.fcfa.org>

**Generations United**

<http://www.gu.org>

**Global Action on Aging**

<http://www.globalaging.org>

**Government Law Center at Albany Law School**

[http://www.albanylaw.edu/sub.php?navigation\\_id=668](http://www.albanylaw.edu/sub.php?navigation_id=668)

**Grantmakers in Aging**

<http://www.giaging.org>

**Greene County Office for the Aging**

<http://www.greenegovernment.com/departments/aging/index.htm>

**New York State Office for the Aging**

<http://www.aging.state.ny.us>

**Osher Lifelong Learning Institute**

<http://www.usm.maine.edu/olli/national>

**Rensselaer County Department for the Aging**

[http://www.rensco.com/departments\\_familyservices.asp](http://www.rensco.com/departments_familyservices.asp)

**Rensselaer Polytechnic Institute**

<http://www.rpi.edu>

**Rockefeller Institute**

<http://www.rockinst.org>

**Sage Colleges**

<http://www.sage.edu>

**Saratoga County Office for the Aging**

<http://www.co.saratoga.ny.us/aindex.html>

**Schenectady County Department of Senior and Long Term Care Services**

[www.schenectadycounty.com](http://www.schenectadycounty.com)

**Schoharie County Office for the Aging**

<http://www.schohariecounty-ny.gov/CountyWebSite/OfficefortheAging/ofaservices.jsp>

**Schuyler Center for Analysis and Advocacy**

<http://www.scaany.org>

**Town of Colonie**

<http://www.colonie.org>

**U.S. Environmental Protection Agency Aging Initiative**

<http://epa.gov/aging>

**University Albany School of Public Health**

<http://www.albany.edu/sph>

**University Albany School of Social Welfare**

<http://www.albany.edu/ssw>

**United Way of the Greater Capital Region**

<http://www.unitedwaygr.org>

**Warren County Office for the Aging**

<http://www.co.warren.ny.us/ofa>

**Washington County Office for the Aging**

<http://www.co.washington.ny.us/Departments/Ofa/ofa1.htm>

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## Our Mission

**Albany Guardian Society continues to seek opportunities to improve the quality of life for seniors as we carry out our Mission.**

- The mission of Albany Guardian Society is to engage in a broad spectrum of endeavors that will improve the quality of life for seniors.
- We will devote funding to develop and support services for seniors.
- We will create an environment that will maintain the growth of creative and innovative ideas.
- We will fund the exchange of information to enable interested parties to learn how to create a better standard of living for our elders.
- We will attract additional resources to increase the impact we can make as we remain mindful of our mission to serve the elderly.